

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1	/						51	/			
2		/					52		/		
3		/					53	/			
4		/					54		/		
5		/					55	/			
6		/					56		/		
7		/					57		8		
8		/					58	/			
9		/					59		5		
10		/					60				
11		/					61				
12		/					62				
13		/					63				
14		/					64				
15		/					65				
16		/					66				
17	/						67				
18		/					68				
19		/					69				
20	/						70				
21		/					71				
22	/						72				
23		/					73				
24		/					74				
25		/					75	/			
26		/					76				
27		/					77				
28		/					78				
29		/					79				
30		/					80				
31		/					81				
32		/					82				
33	/						83				
34	/						84				
35	/						85				
36		/					86				
37		/					87				
38		/					88				
39		/					89				
40	/						90				
41		/					91				
42		/					92				
43		/					93				
44		/					94				
45		/					95				
46		/					96				
47	/						97				
48	/						98				
49	/						99				
50		/					100				
TOTAL IND.							TOTAL IND.	15			
TOTAL DEP.							TOTAL DEP.	55			
TOTAL CLAIMS							TOTAL CLAIMS	70			